

## REVIEW ARTICLE

## HEALTH AND SOCIOECONOMIC IMPACT OF COVID-19: A CASE STUDY OF NIGERIA

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## ABSTRACT

This study aims to examine the health and socioeconomic impact of COVID-19 in Nigeria. The study uses data from the World Health Organization and other relevant sources to analyze the effects of the pandemic on the Nigerian health sector and its ability to provide equal and adequate care for all citizens. The study also explores the use of theories such as structural functionalism and conflict theory to critically analyze the trends in Nigeria and provide an in-depth understanding of societal functions. The findings reveal that COVID-19 has caused a disruption in the treatment of non-communicable diseases and has led to an imbalance in the distribution of healthcare in Nigeria. The study concludes with recommendations for restructuring the healthcare system to combat COVID-19 and ensure the achievement of sustainable development goals.

## KEYWORDS

Sustainable development goals, Health sector, Vaccination, Conflict theory

### 1. INTRODUCTION

Reviewing COVID-19's effects on socioeconomic and health-related variables in Nigeria reveals that the virus had a major influence on daily life and public health. The coronavirus is a pathogenic respiratory infection that was initially discovered in China. It can cause respiratory or enteric infections including the common cold, SARS, and MERS. The virus appeared within a few months and quickly spread to almost every nation, killing about 346,000 people globally (Mamoon, 2020). The World Health Organization states that as of February 2022, COVID-19 had claimed more than 5.8 million lives worldwide. The outbreak of COVID-19, a disease brought on by a new strain of coronavirus, has greatly affected both public health and daily life worldwide. Coronaviruses, as a group, are responsible for causing respiratory or digestive system illnesses, including the common cold, SARS, and MERS. According to a study by De Wilde et al. in 2018, coronaviruses are capable of causing respiratory or enteric infections.

These viruses include the common cold as well as more severe illnesses such as SARS and MERS. The novel coronavirus (SARS-CoV-2) that causes COVID-19 is also a member of the coronavirus family. The virus originated in China and quickly spread to nearly every country within a few months, leading to a large number of fatalities worldwide. As of February 2022, the World Health Organization reported a global death toll of over 5.8 million (Mamoon, 2020). The COVID-19 pandemic has had a profound impact on global health and society, leading many experts to describe it as a significant threat. Fuchs specifically described it as a "humanitarian and societal existential catastrophe," highlighting the severe consequences that the virus has had on individuals, communities, and the world as a whole (Fuchs, 2020). The pandemic has caused widespread illness and death, as well as significant economic and social disruption. It has also highlighted existing inequalities and disparities in healthcare systems, access to resources, and overall well-being.

The spread of COVID-19 has prompted significant global public health efforts and international cooperation. Governments, organizations, and individuals around the world have committed significant financial and human resources to combat the virus and its effects. Efforts include

measures such as widespread testing, contact tracing, quarantine and isolation, vaccine development and distribution, and economic stimulus packages. These efforts have been critical in slowing the spread of the virus and mitigating its impact on society. Additionally, international organizations such as the World Health Organization (WHO) and the World Bank have played a key role in coordinating and supporting these efforts globally (Ataguba, 2020).

According to Mc Kibbin and Fernando, the COVID-19 pandemic has had a disproportionate impact on developing countries, which often have fewer resources to combat the virus and are more reliant on advanced economies for financial support (Mc Kibbin and Fernando, 2020). As many wealthy nations are already struggling to deal with the pandemic, they may be less able to provide the necessary support to developing countries. This can lead to significant fiscal constraints for those nations and make it more difficult for them to respond to the pandemic and its effects. This highlights the importance of international cooperation and support in addressing the pandemic, as well as the need to address underlying inequalities and disparities in healthcare and the economic system. As a result, it is clear that the COVID-19 pandemic will have an impact on economies, particularly in countries with weak and subpar health systems, both immediately and over time. Additionally, it is anticipated that the pandemic would present a significant challenge to public health organizations and their capacity to effectively inform and connect with the public. (WHO, 2020).

Nigeria, one of the first countries in sub-Saharan Africa to suffer the pandemic, reported its first verified occurrence of COVID-19 on February 27, 2020. According to Jonathan and Tara, the country was unprepared for the scale and impact of the epidemic, which created significant public health challenges (Jonathan and Tara, 2020). The country's health system was already stretched thin due to inadequate funding, a lack of equipment and trained personnel, and weak surveillance and response mechanisms. This made it difficult for the country to effectively respond to the pandemic and its effects on the population. Despite these challenges, Nigeria has implemented several measures to curb the spread of the virus, such as lockdown, travel restrictions, testing, and contact tracing; however, the country still faces a high number of cases and deaths.

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According to the Nigerian Center for Disease Control, all 36 of Nigeria's states have seen a sharp increase in the number of confirmed COVID-19 cases (Nigerian Center for Disease Control, 2020). As of February 2022, the NCDC reported 254,091 confirmed cases and 3,141 deaths in Nigeria. This highlights the significant impact that the pandemic has had on the country, despite the efforts made to curb the spread of the virus. The country is still facing challenges in managing the pandemic, such as inadequate testing and contact tracing, a lack of personal protective equipment, and limited access to healthcare. Additionally, the country still struggles with vaccine distribution, which is limited to the high-risk population and health workers.

One major reason for the rapid spread of COVID-19 in Nigeria is the high population density in urban areas. According to UNDP and O'Neill, more than half of the country's population resides in urban regions, which makes it easier for the virus to spread (UNDP, 2020; O'Neill, 2022). Additionally, the number of confirmed cases may be underreported as many people may be asymptomatic carriers who do not get tested or are not reflected in the official statistics. The high number of asymptomatic carriers, coupled with the high population density, could have led to the rapid doubling of confirmed cases on average every 6.5 days.

Furthermore, the lack of sufficient testing and contact tracing, as well as limited access to healthcare, may have also played a role in the spread of the virus. To effectively combat the pandemic, it is important for the country to improve its testing and contact tracing capabilities, as well as provide better access to healthcare and resources for those who are affected. Additionally, the country needs to increase its awareness campaigns on how to prevent the spread of the virus and provide more support for those who are at higher risk of severe illness, such as the elderly and those with underlying health conditions.

As the number of COVID-19 cases in Nigeria increased, the Federal Government moved quickly to put policies in place to try and contain the virus's spread. These steps included closing universities, international airports, stores, marketplaces, public and private schools, and forbidding large gatherings, according to (Oginni et al., 2020). Additionally, the government expanded the existing network of testing facilities by adding six more, bringing the total number to thirteen. This expansion also increased the testing capacity from 500 to 5,000. According to UNDP, this expansion of testing facilities and increased testing capacity were intended to help identify and isolate cases more effectively and slow the spread of the virus (UNDP, 2020).

The Nigerian government declared a state of emergency in the health sector and implemented a total lockdown as a proactive measure to contain the spread of COVID-19. This measure was taken to slow the spread of the virus and protect the population from its effects. Universities, international airports, businesses, marketplaces, public and private schools were all placed on lockdown, and mass gatherings were prohibited. The government also implemented measures such as travel restrictions and quarantine protocols for those returning to the country. The total lockdown was enforced as a short-term measure, with the goal of slowing the spread of the virus and giving the country's health system time to prepare for and respond to the pandemic.

The measures taken by the Federal Government to curb the spread of COVID-19 in Nigeria had significant socio-economic consequences. According to the lockdown and other restrictions led to an increase in demand for electricity, a rise in partner violence, and other negative effects (Ajide et al., 2020; Ibrahim et al., 2020; Fawole et al., 2021). As a result, the government decided to ease the restrictions in phases, but the post-lockdown era still had negative consequences for many Nigerians. According to the pandemic has led to an economic recession, increased inequality and debt, lower returns for savings, and unemployment, among other negative effects on the Nigerian populace (Hassan et al., 2022). These consequences have caused significant hardship for many individuals and families, highlighting the need for continued support and assistance to help mitigate the impact of the pandemic on the population.

## 2. THE SIGNS AND SYMPTOMS OF COVID-19

Due to the fact that COVID-19 and influenza are both infectious respiratory infections, their symptoms may be comparable. Because of this, a person without COVID-19 who exhibits certain symptoms might be mistaken for a COVID-19 patient. Shortness of breath, fever, and cough are the most prevalent COVID-19 symptoms, and these signs are frequently utilized to spot possible cases and prioritize viral testing (CDC, 2021). Shortness of breath, fever, and cough are the most typical signs of COVID-19, although some patients also have gastrointestinal symptoms such as nausea, vomiting, and diarrhea (Nobel et al., 2020). Various symptoms, including sputum production, joint or muscular discomfort, nasal congestion, sore

throat, diarrhea, headaches, and chills, have been linked to COVID-19 in other investigations (Ritchie et al., 2020). According to research by patients with COVID-19 in Nigeria also have a metallic taste, osteoarthritis, loss of smell and taste, and weight loss (Abayomi et al., 2021).

## 3. COVID-19 Vaccination

The COVID-19 pandemic brought with it fear, panic, and uncertainty that may have led to an exacerbation of health and socioeconomic inequalities both within and between countries. National strategies for preventing or reducing the spread of COVID-19 often focus on socioeconomic determinants of health (SDH). These multi-faceted approaches are mostly implemented outside of the healthcare sector and include measures such as social isolation, avoiding public events or large gatherings, school closures, travel restrictions, and promoting good hygiene practices such as frequent handwashing or sanitization, as noted by (Fushs, 2020). Staying at home or working remotely, tracking and isolating suspected cases, self-isolation, the use of face masks, and total lockdowns in certain nations or areas are some other techniques used to avoid or decrease COVID-19 infection, transmission, and treatment (Ajibo, 2020; Glik, 2007). The global health community then concentrated on identifying a long-term remedy, which ultimately manifested itself a few months later in the form of a vaccine. Many people, however, were skeptical about this because the quickest vaccination ever developed (for the mumps) took four years to create, as stated in an article by (Philip, 2021).

However, research by indicates that a significant number of Nigerians would be willing to take the COVID-19 vaccine if it has been shown to be effective with minimal side effects and if they are given the opportunity to give their informed consent (Chiedozie et al., 2021; Enitan et al., 2020). The study also recommends that more education and awareness about the vaccine be provided, particularly to those who have limited knowledge about health or are uneducated (Hassan et al., 2022). This could help address concerns and misconceptions about the vaccine and increase public trust in the government's handling of the COVID-19 pandemic (Wegbom et al., 2021). A group researchers suggest that many Nigerians would be willing to receive a COVID-19 vaccine if it is proven to be safe and effective with minimal side effects and if they are given the opportunity to give their informed consent (Chiedozie et al., 2021). The study also emphasizes the importance of providing more education and awareness about the vaccine, particularly to those with limited knowledge or education about health. This could help address concerns and misconceptions about the vaccine and increase public trust in the government's handling of the COVID-19 pandemic.

## 4. STATISTICAL ANALYSIS OF COVID-19

As of May 1, 2021, the COVID-19 pandemic has infected over 153 million individuals and resulted in over 3.2 million deaths worldwide. The virus has had a significant impact on mortality, increasing the number of deaths globally, regionally, and nationally, and lowering life expectancy in many countries. The long-term health impacts of COVID-19 are still not fully understood. The World Health Organization (WHO) estimates that COVID-19 will be responsible for at least 3 million more deaths globally in 2020, both directly and indirectly, on top of the current death toll of 1.8 million, which is an increase of 1.2 million deaths. As of the end of January 2020, 20 countries had detected COVID-19. By the end of February, that number had increased to 54, and by March, it had spread to 202 countries. By April, 212 countries had been affected by the pandemic, and 174 of those reported at least one fatality from COVID-19.

As of February 15, 2022, the World Health Organization (WHO) reported 5,821,004 fatalities and 412,351,279 documented cases of COVID-19 infection globally. The pandemic has had a varied impact around the world. Europe has reported the most confirmed cases (166,359,260), while Africa has reported the fewest (8,233,105). According to estimates, 26% of people worldwide (or 1 in 4) have SARS-CoV-2 antibodies as a result of immunization or infection. Furthermore, according to WHO, the percentage of people who have these antibodies varies by region, with the Western Pacific Region having the lowest percentage at 0.3% and high-income countries in the Americas having the highest percentage at 57% (WHO, 2020). According to the Nigerian Center for Disease Control, a total of 254,091 cases of COVID-19 have been confirmed in Nigeria after 4.23 million tests have been conducted. Lagos State reported the highest number of cases with 98,693, while Kogi State reported only five cases since the beginning of the pandemic.

## 5. SUSTAINABLE DEVELOPMENT GOALS ON COVID-19

The Millennium Development Goals (MDGs) were a set of eight targets adopted by the United Nations in 2000 with the goal of being achieved by

2015. The MDGs aimed to address issues such as poverty, hunger, disease, and lack of access to education and healthcare. However, despite progress being made in some areas, many of the goals were not fully achieved, and inequalities persisted both within and between countries. The Sustainable Development Goals (SDGs), which were adopted in 2015, build on the MDGs and aim to "leave no one behind" by addressing issues of inequality and marginalization. The SDGs include specific targets related to reducing inequality, such as goal 10, which aims to "reduce inequality within and among countries." Additionally, several other SDGs are closely linked to reducing inequality, such as goals 1 and 2 to eradicate poverty and end hunger, goal 3 to ensure healthy lives, goal 4 to provide inclusive and equitable education, and goal 5 to achieve gender equality (WHO, 2021).

It is clear that the COVID-19 pandemic has highlighted and exacerbated existing inequalities in access to healthcare and health outcomes in Nigeria and around the world. The SDGs, particularly Goal 3 on ensuring healthy lives, have been challenged by the pandemic, and it is crucial that these inequalities are addressed in order to achieve the goal of leaving no one behind. The WHO's Triple Billion Goals and the SDGs both aim to improve health and well-being for all, but the pandemic has shown that much work still needs to be done to ensure that these goals are met, particularly for marginalized and vulnerable populations.

Overall, the COVID-19 pandemic has highlighted the ongoing inequalities in health outcomes and access to healthcare in Nigeria and around the world. The lack of comprehensive data and a reliable data infrastructure has made it challenging to create effective strategies for managing the pandemic and resuming progress towards the Triple Billion Targets and the SDGs. Efforts to increase vaccination access, such as the COVAX program, are helping to speed up the development, production, and distribution of COVID-19 vaccines, but fair and equitable access remains a significant challenge, with a disproportionate number of doses going to high-income countries rather than low-income countries like Nigeria.

Pre-pandemic inequalities have increased pre-existing inequality and run the danger of prolonging the pandemic, which would undermine the entire "2030 Sustainable Development Agenda" and inequitably distribute vaccinations throughout the world. Since "no one is safe until everyone is protected," it is crucial to achieve universal vaccination in order to prevent the potential of a more virulent or infectious strain (WHO, 2021). Overall, COVID-19 has had an influence on a variety of industries, particularly the health industry, and has impeded the achievement of a number of sustainable development objectives because of the virus's financial and health effects on the world's population.

## 7. CRITICAL EVALUATION OF COVID-19 IN NIGERIA USING SOCIOLOGICAL THEORIES

COVID-19 has had a significant impact on Nigeria, with the virus disproportionately affecting the underprivileged, the elderly, those who live in communal housing, and people with pre-existing medical conditions. This can be analyzed through several sociological theories, such as structural functionalism, conflict theory, and symbolic interactionism. Structural functionalism looks at how different parts of society work together to create stability and order. The spread of COVID-19 in Nigeria can be seen as a disruption to the stability and order of society, with the virus highlighting pre-existing inequalities and the lack of access to healthcare for certain groups of people. Conflict theory, on the other hand, looks at how different groups in society compete for resources and power. The distribution of COVID-19 vaccines, for example, is a clear example of how different groups are competing for limited resources, with high-income countries receiving a disproportionate number of doses compared to low-income countries like Nigeria.

Symbolic interactionism focuses on how individuals interact with one another and how their actions are shaped by their perceptions and understandings of the world. The pandemic has highlighted the importance of communication and how misinformation can lead to the further spread of the virus. COVID-19 has exposed pre-existing inequalities in Nigeria and has had a significant impact on the country's healthcare system and economy. It is important for the government and other organizations to address these issues in order to effectively manage the pandemic and work towards achieving sustainable development goals.

The COVID-19 pandemic significantly disrupted the prevention and treatment of non-communicable illnesses, according to a study by the World Health Organization (WHO) in 2020. The focus on the virus has delayed the treatment of those who are at a higher risk of developing COVID-19 because they have non-communicable disorders. A recent study revealed that numerous low-income countries, including Bangladesh, Nigeria, Kenya, and Pakistan, prioritized treating COVID-19 patients over

other health issues, demonstrating that this problem is not exclusive to rich nations. Due to this, healthcare costs have increased, while income has decreased. The structural functionalism theory, which holds that every aspect of society must work together to ensure that the society as a whole is functional, is one theory that can be used to analyze these studies. In the context of COVID-19, all components of the healthcare system have focused on the virus, leaving other diseases and healthcare needs unaddressed.

This has hindered the achievement of Sustainable Development Goal 3, which is to provide good health for the world population. Consequently, addressing COVID-19 and other diseases must be balanced in order for the healthcare system to be effective. The Sustainable Development Goals and the objective of offering citizens high-quality healthcare will both be helped by this. The Karl Marx Conflict Theory, which describes the disparity in all social systems and the imbalance in the global social structure, is another theory that may be utilized to explain this case study. According to this view, society is set up to favor the elite over the majority, giving one class of individuals greater value than another. People who are neither COVID-19 patients nor wealthy receive secondary healthcare, indicating a clear imbalance in the socioeconomic structure. The Sustainable Development Goal of ensuring universal access to healthcare is thereby undermined.

## 8. RECOMMENDATIONS

It is obvious that the COVID-19 epidemic has had a significant influence on international events, notably in Nigeria. Additionally, this has slowed down efforts to accomplish a few of the sustainable development objectives by the year 2030. Restructuring is necessary to guarantee that the global health sector can handle the COVID-19 virus successfully while simultaneously addressing other health concerns in light of the virus's considerable impact on the health sector. To achieve this balance and address the current imbalance in the world health sector and in Nigeria, I recommend the following:

- Increasing the number of health officials in Nigeria through recruitment and providing proper training for existing officials will ensure adequate personnel to combat COVID-19 and other health issues.
- Increasing awareness and education on other health issues such as polio and cancer, similar to the efforts made for COVID-19.
- Encouraging more widespread vaccination for COVID-19 and other health issues in Nigeria to ensure equitable distribution of health resources to all patients.

## 9. CONCLUSION

In conclusion, this review examined the impact of COVID-19 on Nigeria, specifically focusing on how the pandemic has led to a disruption in the distribution of healthcare and hindered the progress towards achieving sustainable development goals, particularly in providing equal access to healthcare for all. The review also analyzed the situation using theories of structural functionalism and conflict theory to understand the societal dynamics at play. Finally, recommendations were provided for addressing the imbalance in healthcare distribution caused by COVID-19 and ensuring that the sustainable development goals are met. Additionally, Nigeria has had a major COVID-19 impact, notably in the health sector. According to the World Health Organization (WHO), COVID-19 has severely curtailed and disrupted non-communicable disease prevention and treatment services. Due to this, individuals with non-communicable illnesses are now more likely to develop the COVID-19 virus, despite the fact that this has interrupted their ability to receive treatment.

Additionally, a recent study has revealed that several low-income nations, like Nigeria, have given COVID-19 patient treatment precedence above other health-related morbidities. As a result, the expense of healthcare has increased as income has fallen. The COVID-19 idea has been examined in this study, along with its impact on Nigeria and how it has contributed to other health problems such as unequal treatment. It also looked at how COVID-19 has hindered the implementation of the SDGs, particularly the third objective, which is to ensure that everyone has access to high-quality, equitable healthcare. The review critically analyzed Nigerian trends using structural functionalism theory and Karl Max conflict theory in order to provide a thorough explanation of the events and how the society operates. The evaluation also included suggestions that may be taken into account when reforming the unequal distribution of health care that COVID-19 has caused in Nigeria, as well as suggestions that would guarantee the timely achievement of the SDGs.



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